Towards a social constructivist approach in sexual and reproductive health
The issue of EC use in sub-saharian African countries

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Sexual Health (WHO, 2002)

- Sexual health is a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity.

- Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.

- For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.
Essentialist versus Social constructivist approaches in Sexual Health

- Essentialist theories: sex is determined chiefly by biological forces, even though situational and environmental factors may give rise to variation

- Social constructionist theories: sexual and preventive practives as social practices, socially learned, plastic and amenable to modification, and shaped extensively by socialization, social context and social and cultural norms
ECAF Project

Analyse EC from a social- anthropological perspective: representations and uses take place at the intersection of two dimensions:

(i) a Northern pharmaceutical norm (effectiveness /scepticism as to the political issues underlying the diffusion of EC)

(ii) local understandings of the timing of conception and pregnancy (acting “in emergency” may not fit with local understandings of the timing of conception, EC has an abortive effect?)

149 women, 77 men, 35 providers

A Adjamabgo Dakar, N Bajos France (PI), FBakass Maroc, I Osey – Ghana, A Soubeiga Burkina-Faso
Representations of a medical product (R1)

- A political Northern model ...
  
  *These methods are nothing other than a strategy of the west to compete with African countries demographically. (SM,19)*

- Influencing sexual behaviours ...
  
  *If we have this, then we can have sex anytime (...) That will result in an increase in immoral behaviour (GW, 27) // It can be good for those without partners and who cannot sit down without getting into a relationship with a man (GW 33)*

- Increasing the risk of sterility: chemical product
  
  *the uterus will be damaged, the vagina will shrink, the tubes will be affected // It’s good because you are not taking it all the time (WB 24)*

- EC and the process of conception
  
  *it is still just blood (BW 23) // As soon as they meet, there may be the beginnings of formation (..). I have the feeling that this kind of contraception is really like... it’s like an abortion (BM 29)*

  Opinions are usually internally consistent and gender specific
EC as one post-coital method among others (R2)

- **Emergency use**
  Often occurs as a result of a burst condom during the fertile period or as a result of errors in calculating the cycle

- **Planned use**
  "EC is very convenient, it is easy to take, is not too much of drugs (...) It is not the type which you have to take every day; it is only two pills." (GW 22)

- **“Conflictual situations”**
  Taking EC then as clearly a part of power strategies and counter-strategies deployed by women against those of their partner
EC and social control (D1)

- Same fears as for the pill (demographic control, risk of sterility)

- Over the counter: escape from the obstacles of the partner or the family and of the medical establishment.

- Episodic and discreet use <-> sexual life remain hidden. Important issue in SSA because of the development of pre-marital sex not socially accepted

→ The social *gendered* representations of EC seem to reveal the strength of the social control over women’s sexuality

- Men = risk of women’s sexuality becoming unbridled / Women= risk of sterility.
- Opinions refer to women’s sexuality becoming out of control but very rarely to men’s sexual life.
EC and the process of conception (D2)

- The dividing line between contraceptive and abortive actions is not easily drawn in people’s representations. This ambivalence is all the stronger because many post-coital contraceptive techniques are similar to those employed to induced abortions.

- EC: sexual activity and contraceptive action are dependent on each other
  - Where contraception is pre-coital there is a disjunction between the sexual activity and the contraceptive action: EC use in *emergency*
  - Where contraception is post-coital, no disjunction: *planned use of EC*
Conclusion

- The issue of lessening control over the sexuality and fertility of women by men represents a brake on EC’s spread.

- EC is no more than another post-coital method whose use fits easily into the prevalent systems of temporal representations in the three countries studied.

- As the concept of emergency is hardly ever used spontaneously and in order to fit in with local contraceptive landscapes the name “emergency contraception” should be changed?